

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002498

Entity Name: MSG GROUP, INC.

FILED
Jan 02, 2007
Secretary of State

Current Principal Place of Business:

7590 N. GLENOAKS BLVD.
BURBANK, CA 91504

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10999
BURBANK, CA 915100999

New Mailing Address:

FEI Number: 20-0751031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONDL, MIKE
12905 NW 32ND AVENUE
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: VALENTA, RONALD F
Address: 7590 N. GLENOAKS BLVD.
City-St-Zip: BURBANK, CA 91504

Title: PCEO () Delete
Name: WAUGAMAN, DOUGLAS A
Address: 7590 N. GLENOAKS BLVD.
City-St-Zip: BURBANK, CA 91504

Title: EVPS () Delete
Name: ROBERTSON, JAMES S
Address: 7590 N. GLENOAKS BLVD.
City-St-Zip: BURBANK, CA 91504

Title: CFO () Delete
Name: VILLEGAS, ALLAN A
Address: 7590 N. GLENOAKS BLVD.
City-St-Zip: BURBANK, CA 91504

Title: GCAS () Delete
Name: WILSON, CHRISTOPHER A
Address: 7590 N. GLENOAKS BLVD.
City-St-Zip: BURBANK, CA 91504

Title: D () Delete
Name: HARRIS, SUSAN L
Address: 7590 N. GLENOAKS BLVD.
City-St-Zip: BURBANK, CA 91504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: SWANI, SANJAY
Address: 320 PARK AVENUE, SUITE 2500
City-St-Zip: NEW YORK, NY 10022

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MICHAEL, DONOVAN
Address: 320 PARK AVENUE, SUITE 2500
City-St-Zip: NEW YORK, NY 10022

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER A WILSON

GCAS

01/02/2007

Electronic Signature of Signing Officer or Director

Date